ICU Insulin Drip Order Set for Target Blood Glucose 140-180 mg/dL [1267]

Not for DKA, Hyperosmolar Syndrome, or Pregnancy.

Target Blood Glucose = 140-180 mg/dL - Recommend initiating protocol when blood sugar is GREATER OR EQUAL to 180 mg/dL for two consecutive readings.

Providers: If patient has active insulin / non-insulin ANTIHYPERGLYCEMIC orders, please consider discontinuing.

General	
Finger Stick Blood Glucose (FSBG) Monitoring	
[X] Bedside glucose monitoring	Routine, Every hour -Monitor blood glucose every 1 hour unless otherwise specified
	-If blood glucose BETWEEN 140 - 180 mg/dL for 3 consecutive readings, monitor blood glucose every 2 hours and Call MD to transition to long acting subcutaneous insulin, if appropriate
	-Algorithm Advancement: If blood glucose GREATER THAN 180 mg/dL for 3 consecutive blood glucose readings after the initial blood glucose reading. ADVANCE TO THE NEXT HIGHER algorithm. Repeat step for every 3 consecutive readings above goal glucose range
Notify (Selection Required)	
[X] Notify Provider	Routine, Until discontinued, Starting S, If Blood Glucose below 70 mg/dL
	AND
	If Blood Glucose greater than 360 mg/dL and on Algorithm 4, 5, or 6

Infusion Management - ICU Insulin Drip Algorithm 140 - 180 mg/dL

Initial Bolus Dose (Single Response)

()	No Bolus	Routine, Once For 1 Occurrences
() I	For initial blood glucose of 200 - 300 mg/dL - insulin	5 Units, intravenous, once
	bolus from bag	If initial blood glucose is 200 - 300 mg/dL, give 5 units IV
		BOLUS x 1 from insulin bag and start at MD specified
		algorithm
	For initial blood glucose of GREATER THAN 300 mg/dL - insulin bolus from bag	10 Units, intravenous, once If initial blood glucose is GREATER THAN 300 mg/dL, give 10 units IV Bolus x 1 from insulin bag and start at MD specified algorithm.

Choose One Algorithm Below for Initiation of Therapy: (Selection Required)

Glucose (mg/dL)	GLUCOSE GOAL 140-180 mg/dL						
	1. Turn infusion off. Give D50% 50 mL. Notify MD.						
50 or less	2. Recheck blood glucose every 30 min until glucose is greater than 70 mg/dL.						
	3. When blood glucose is GREATER THAN 180 mg/dL, DECREASE TO THE NEXT LOWER algorithm and restart infusion at the appropriate rate.						
	1. Turn infusion off. Give D50% 25 mL or ½ cup of juice. Notify MD.						
51-69	2. Recheck blood glucose every 30 min until glucose is greater than 70 mg/dL.						
	3. When blood glucose is GREATER THAN 180 mg/dL, DECREASE TO THE NEXT LOWER algorithm and restart infusion at the appropriate rate.						
	1. Turn infusion off.						
	2. Recheck blood glucose every 30 minutes until glucose is greater than 100 mg/dL then every one hour.						
	3. When blood glucose is GREATER THAN 180 mg/dL, DECREASE TO THE NEXT LOWER algorithm and restart infusion at the appropriate rate.						
Glucose	Algorithm 1	Algorithm 2	Algorithm 3	Algorithm 4	Algorithm 5	Algorithm 6	
(mg/dL)	(units/hr)	(units/hr)	(units/hr)	(units/hr)	(units/hr)	(units/hr)	
100-139	0.2	0.5	1	2	3	4	
140-159	0.5	1	2	3	4	6	
160-179	0.8	1.5	3	4	5	8	
180-199	1	2	4	5.5	7.5	10	
200-219	1.2	2.5	5	7	9	12	
220-239	1.5	3	5.8	8.5	11	14	
240-259	2	4	6.7	11	13	16	
260-279	2.5	4.5	7.5	13	15	18	
280-299	3	5	9	15.5	19	20	
300-319	3.5	5.7	10	17.5	21	23	
320-339	4	6.5	11.2	20	23	26	
340-359	4.5	7	12.5	22.5	27	30	
360 or	5 8	0	13.3	25.5	30	35	
greater		0		Call MD	Call MD	Call MD	

Only Algorithms 1 - 4 are available for initiation of the rapy. (Algorithms 5 & 6 are only for use during advancement of a patient's insulin needs

[[]X] Select Algorithm (Single Response) (Selection Required)

() Algorithm 1: Start here if insulin sensitive (e.g. BMI less or equal to 30, Type 1 Diabetes Mellitus, or End Stage Renal Disease)	0.2-35 Units/hr, intravenous, continuous Select Appropriate Algorithm: Algorithm 1		
() Algorithm 2: Start here if mild insulin resistance (e.g. BMI greater than 30, Type 2 Diabetes Mellitus, or initial blood glucose less than 300mg/dL)	0.2-35 Units/hr, intravenous, continuous Select Appropriate Algorithm: Algorithm 2		
 () Algorithm 3: Start here if moderate insulin resistance (e.g. After surgery, on steroid therapy, or initial blood glucose 300 mg/dl - 399 mg/dL) 	0.2-35 Units/hr, intravenous, continuous Select Appropriate Algorithm: Algorithm 3		
Algorithm 4: Start here if severe insulin resistance (e.g. Status post organ transplantation or initial blood glucose 400 mg/dL or greater)	0.2-35 Units/hr, intravenous, continuous Select Appropriate Algorithm: Algorithm 4		
Hypoglycemia Management (Selection Required)			
[X] Dextrose 50% Injection PRN hypoglycemia	intravenous		
Management of Patient with Nutritional Orders			
[] insulin lispro (AdmeLOG) injection	3 Units, subcutaneous, 3 times daily before meals Give with each meal in addition to the infusion rate. HOLD thi dose if patient is NPO or eating LESS THAN 50% of meal. Wait two hours before rechecking blood glucose and then adjust the infusion rate per algorithm.		
[X] dextrose 10 % infusion	40 mL/hr, intravenous, continuous PRN, other, for interruption in TPN or tube feeds Start D10W at the previous TPN or tube feed rate up to a maximum rate of 40 mL/hr and DECREASE to the next LOWER algorithm on the table.		